								÷			202	/0/_		
•								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									D ROXIPECY					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								TE	иттү —	OR	OTHER			
TC	TAL CLAIMS		26				RAT	ΓĒ	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	ОЯ	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			2 6 minus 20-		· '\\		XS	X\$ 9== /		OR	X\$18=	163		
INDEPENDENT CLAIMS			4 minus 3 =		• (X40	X40=			X80=	29		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				/			OR		0		
* If the difference in column 1 is less than zero, enter *0" in column 2							+13	_/		OR	+270=			
								AL	L	OR	TOTAL	392		
7	19050	(Column 1)	MENDEL	ENDED - PART II (Column 2) (Column 3)			SM	W	ENTITY	OR	OTHER SMALL			
1		CLAIMS REMAINING		HIGH	EST	PRESENT			ADDI-			ADDI-		
		AFTER AMENDMENT		PREVA PAID	OUSLY	EXTRA	RAT	re	TIONAL FEE		RATE	TIONAL FEE	Best	
	Total	. 56,	Minus	. 7	6,	-6	XS	9 =		ØR	X\$18=		-	
AMENDMEN	Independent	. 4	Minus		U	0	. X40)=	7	OR	X80=	./	Available	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							5=	/		+270=		<u>Q</u>	
/ /								STAL	/	OR	TOTAL		Q	
12/4/15								FEE		OR	ADDIT. FEE		I 있	
_		(Column 1)	-	RIG	mn 2) (EST	(Column 3)			ADDI-			ADDI-		
AMENDMENT IN		REMAINING AFTER		PREVI	BER OUSLY	PRESENT EXTRA	RAT	ſΕ	TIONAL		RATE	TIONAL	18	
	Total	· 24	Minus	PAID	FOR	= Ø	XS		FEE		X\$18=	FEE	Copy	
	Independent	. 4	Minus		U	-0				ØR				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)=	-/-	OR	X80≤			
							+13			OR	≠270 =			
									<u>/</u>	OR	TOTAL ADDIT. FEE		ļ	
		(Column 1)	•		mn 2)	(Column 3)		l						
AMENDMENT		CLAIMS REMAINING AFTER		NUA	REST ABER OUSLY	PRESENT	RAT	TE.	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AMENDMENT			FOR	EXTRA			FEE			FEE	•	
Ş	Total	•	Minus	<u>"</u>		-	XS	9=		OR	X\$18=			
¥	Independent	MTATION OF M	Minus	PENDEN	T CI AIN	•	X40)=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											→270=		1	

* If the entry in column 1 is less then the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number bound in the appropriate box in column 1.

OR ADDIT. FEE